Colorado Department of Health Care Policy & Financing

Hepatitis C Treatment Outcomes

Please complete this form to report SVR12 and SVR24 results to the Department for your Medicaid patients that have completed treatment with the Direct-Acting Antivirals such as Viekira, Sovaldi, Harvoni, Zepatier, Mavyret, Epclusa, Vosevi, Olysio, Technivie and Daklinza.

| Medicaid ID | Last Name | First Name | Hep C tx agent(s) | Treatment Start Date | Treatment End Date | SVR12 (12 wks after tx | SVR24 (24 wks after tx | Notes or Comments |
|-------------|-----------|------------|-------------------|-------------------------|-----------------------|------------------------|------------------------|-------------------|
| | | | | | | end date) | end date) | |
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Please fax to 303-866-3590